



**NEVADA  
HEALTH  
RESPONSE**

**FOR IMMEDIATE RELEASE**

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**COVID-19 Press Bulletin for 1-4-2021**

Carson City, NV — Today, Caleb Cage, Nevada COVID-19 Response Director and Julia Peek, Deputy Administrator of Community Health Services were joined by DuAne L. Young, Deputy Administrator of the Division of Health Care Financing and Policy to provide updates on Nevada's ongoing COVID-19 response and discuss the coordination among hospitals and skilled nursing facilities to address the needs of patients during a call with members of the media.

This bulletin provides facts, figures, and informational items from the call. As a reminder, data is provided in a dashboard on the home page of the [Nevada Health Response](https://www.nvhealthresponse.nv.gov) website and can be accessed 24 hours a day.

**SUMMARY:**

- All counties in Nevada, with the exception of Storey, have been flagged for elevated disease transmission.
  - All are flagged with a high case rate (>200).
  - All except Eureka are flagged with a high test positivity (>8%).
  - Only Eureka, Lincoln were flagged with a low average number of tests per day per 100,000 (<100).
  
- There will not be a COVID-19 Mitigation and Management Task Force Meeting this week.

- As of today, Nevada has logged 233,032 cases, with the 14-day rolling average of daily cases being 1,680.
- The state has completed a total of 2,140,442 molecular tests since the beginning of COVID-19.
- The test positivity rate over the last 14 days is 20.0%.
- The Nevada Hospital Association reports there are currently 1,879 COVID-19 hospitalizations (1,738 confirmed; 141 suspected)
- More information on hospitalization trends can be found on the [Nevada Hospital Association](#) website.
- The Joint Information Center launched the Nevada Health Response website redesign process over the weekend and worked hard to ensure the website was functional by Monday morning. There were also updates to the data dashboard.
- A key highlight of the new website as the State continues to respond to COVID-19 is a page dedicated to providing Nevadans with the State's "current status." The page includes the latest mitigation measures for the state in an easy-to-follow format.
- If local governments take locally-specific mitigation actions, the website will also include that information.
- Also, there's a new page dedicated to the State's COVID-19 vaccination efforts and will help direct Nevadans to the most up-to-date information on the status of the vaccine campaign on

[www.NVCovidFighter.org](http://www.NVCovidFighter.org).

- Additionally, the Nevada COVID-19 Dashboard has been updated to offer enhanced navigation, increased usability, improved accessibility for users with disabilities, and more options to filter county-level data.
- This is the second update to the dashboard since the previous update went live in October 2020. The dashboard updates were developed by the DHHS Office of Analytics with [Microsoft AI for Health](#) to revamp the design of the dashboard, which also allows users to download data.
- The Office of Analytics continues to review the data and available metrics as Nevada's COVID-19 response changes to provide the most relevant data.
- At this point, it is too soon to determine the impacts from the holidays.
  - It is possible we may see an increase in testing numbers within the next week if people chose not to seek testing over the holiday, or because locations were limited over the holiday weekend.
  - It's similar to what we see on the weekends, where testing and reporting tend to go down, then catch up a few days later -- and similar to what we've experienced as a result of holidays in the past.
  - This is why many of our metrics emphasize using seven or 14-day averages, to smooth out any one-day increases. Focusing on trends remains critical.

- The State is aware there were gatherings on New Year's Eve. Outside of what has been shown in the news, like every state and country, we know there were also private gatherings.
- What we now recommend for Nevadans who were out in large crowds on New Year's Eve and not following the public health guidance, would be to act as though you may have contracted COVID. Be extra mindful of your interactions with others in the coming days.
- Public health guidance suggests seeking a COVID test between 5 and 7 days after potential exposure – the Nevada Health Response website maintains a testing locator map. If you feel ill, you should stay home and isolate yourself from others. While waiting for test results, you should quarantine to the maximum extent possible.
- It was a risk to go out and gather on New Year's Eve, the Governor made that clear. At this time, we are focusing on making sure people know how to handle the next steps. Again, if you were out in the crowds, you should assume you were exposed to COVID-19 and you should follow the steps outlined above.
- As Nevadans, we must handle these next steps to the best of our ability to do all that we can to protect one another.
- The last time he spoke to Nevadan, the Governor read directly from the White House report with recommendations which said "No unmasked public gatherings are safe and no indoor private gatherings are safe without all members fully masked."
- As the Governor has said repeatedly, safety is a partnership. We're relying on that partnership from the State, local officials, business and the public to make good choices and be responsible.

- DuAne L. Young, Deputy Administrator of the Division of Health Care Financing and Policy, commonly known as Nevada Medicaid, provided an update as well.
- The Department's overarching goal continues to be to help patients by ensuring access to services and coordinating care needs.
- A few months ago, we began working across Divisions to address the concern of hospital patients in need of placement and a suitable discharge plan.
- To do this, we are coordinating among hospitals and skilled nursing facilities to address the needs of these patients.
- DHHS has formed a hospital discharge strike team that assists facilities in moving recipients by:
  - Working daily with Managed Care Organizations on member updates
  - Finding placement for Fee-For-Service recipients
  - Assisting with eligibility for those who are uninsured or on Medicare but who may be dually eligible for Medicaid, and
  - Addressing regulatory and guardianship issues
- DHHS is partnering with the Division of Insurance to address prior authorization issues within their plans and an appeal has been submitted to the Centers for Medicare and Medicaid Services to address issues with Medicare Managed Care.
- Data shows that Medicaid accounts for less than 30% of patients awaiting discharge with around 40% being Medicare recipients and other commercial payors.

- The team is approaching this concern on a hospital-level, working with each facility to understand their needs and the needs of each patient and matching them with available beds.
- This is not a one size fits all approach and we are building strategies to help facilities now and into the future.
- Each region in the state has dedicated staff assigned to work on these issues.
- Staffing has been discussed on each call and the State has provided facilities with contacts at other health care agencies, such as home health, that may be able to assist.
- Also, the state is demonstrating flexibility with licensure and the use of telehealth to allow clinical staff to supervise non-medical staff.
- We are looking at all opportunities and ideas to address this issue and the partnership of local health authorities, facilities and other agencies has been vital.

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